



10-16-06

IFW #

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	09/700,530
		Filing Date	02/09/2001
		First Named Inventor	Willy SAGEFALK
		Group Art Unit	2622
		Examiner Name	YE, LIN
Total Number of Pages in This Submission		Attorney Docket Number	
		STGUP008	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply 10 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement Statement (2 pgs) Form 1449 (1 pg) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers # (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition # <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1-Check of \$510.00
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	IP Creators'	
Signature	Charles C. Cary Reg. #: 36,764	
Date	October 12, 2006	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service in an envelope with Express mail No. EQ 806970084 US addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 14500 Alexandria, VA 22313-1450 on this date:

Typed or printed name	Charles C. Cary		
Signature		Date	October 12, 2006

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

EQ806970084US



PTO/SB/17 (10-03)

Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 510)

Complete if Known

Application Number	09/700,530
Filing Date	02/09/2001
First Named Inventor	Willy SAGEFALK
Examiner Name	YE, LIN
Group Art Unit	2622
Attorney Docket No.	STGUP008

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 50-1338
Deposit Account Name IP Creators

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051	130	2051 65 Surcharge - late filing fee or oath	\$0
1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	\$0
1053	130	1053 130 Non-English specification	\$0
1812	2,520	1812 2,520 For filing a request for ex parte reexamination	\$0
1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	\$0
1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	\$0
1251	110	2251 55 Extension for reply within first month	\$0
1252	410	2252 205 Extension for reply within second month	\$0
1253	930	2253 465 Extension for reply within third month	\$0
1254	1,450	2254 725 Extension for reply within fourth month	\$0
1255	1,970	2255 985 Extension for reply within fifth month	\$0
1401	320	2401 160 Notice of Appeal	\$0
1402	320	2402 160 Filing a brief in support of an appeal	\$0
1403	280	2403 140 Request for oral hearing	\$0
1451	1,510	1451 1,510 Petition to institute a public use proceeding	\$0
1452	110	2452 55 Petition to revive - unavoidable	\$0
1453	1,300	2453 650 Petition to revive - unintentional	\$0
1501	1,300	2501 650 Utility issue fee (or reissue)	\$0
1502	470	2502 235 Design issue fee	\$0
1503	630	2503 315 Plant issue fee	\$0
1504	300	Publication Fee	\$0
1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	\$0
1806	180	1806 180 Submission of Information Disclosure Stmt	\$0
8021	40	8021 40 Recording each patent assignment per property (times number of properties)	\$0
1809	750	2809 375 Filing a submission after final rejection (37 CFR § 1.129(a))	\$0
1810	750	2810 375 For each additional invention to be examined (37 CFR § 1.129(b))	\$0
1801	750	2801 375 Request for Continued Examination (RCE)	\$0
1802	900	1802 900 Request for expedited examination of a design application	\$0
Other fee (specify)		10 Printed copies of Patent @ \$3.00	\$0

SUBTOTAL (1) (\$ 0)

2. EXTRA CLAIM FEES

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		-20 =	-20 x	\$0
		-3 =	-3 x \$100 =	\$0
				\$0

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
1202	18	2202 9 Claims in excess of 20
1201	64	2201 42 Independent claims in excess of 3
1203	280	2203 140 Multiple dependent claim, if not paid
1204	84	2204 42 ** Reissue independent claims over original patent
1205	18	2205 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

*or number previously paid, if greater; For Reissues, see above

SUBTOTAL (3) (\$ 510)

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Charles C. Cary	Registration No. (Attorney/Agent)	36,764	Telephone	(408) 850-9585
Signature				Date	October 12, 2006

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